

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Hisatomo OHKI et al.
Title: INHALANT MEDICATOR
Appl. No.: Unassigned
Filing Date: November 2, 2000
Examiner: Unassigned
Art Unit: Unassigned

UTILITY PATENT APPLICATION
TRANSMITTAL

Commissioner for Patents
Box PATENT APPLICATION
Washington, D.C. 20231

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

Hisatomo OHKI
Shigemi NAKAMURA
Kazunori ISHIZEKI
Yoshiyuki YAZAWA
Akira YANAGAWA

Enclosed are:

- [X] Specification, Claim(s), and Abstract (56 pages).
- [X] Formal drawings (24 sheets, Figures 1-33).
- [X] Japanese Language Declaration and Power of Attorney (8 pages).
- [X] Claim for Convention Priority and 2 Documents.
- [X] Assignment of the invention to UNISIA JECS CORPORATION.
- [X] Assignment Recordation Cover Sheet.

☒ Information Disclosure Statement.

☒ Form PTO-1449 with copies of 2 listed References.

The filing fee is calculated below:

	Claims as Filed		Included in Basic Fee		Extra Claims		Rate		Fee Totals
Basic Fee							\$710.00		\$710.00
Total Claims:	27	-	20	=	7	x	\$18.00	=	\$126.00
Independents:	7	-	3	=	4	x	\$80.00	=	\$320.00
If any Multiple Dependent Claim(s) present:						+	\$270.00	=	\$0.00
Assignment Recordation Fee							\$40.00		\$40.00
							SUBTOTAL:	=	\$1196.00
<input type="checkbox"/> Small Entity Fees Apply (subtract ½ of above):								=	\$0.00
							TOTAL FILING FEE:	=	\$1196.00

☒ A check in the amount of **\$1196.00** to cover the filing fee is enclosed.

☐ The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.

☒ The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

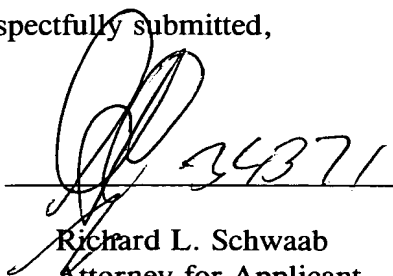
Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date November 2, 2000

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By


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